

## State of Georgia Campaign Contribution Disclosure Report

### 1. Check One:

☒ **Original Report**

**OR**

☐ **Amendment**  
(Please indicate Reporting Period and Year of Original)

### 2. Filing is being made on behalf of:

☒ Candidate or Public Official  
(Office sought or held):

Richmond County Sheriff  
[Include county, municipality, district, post or judicial circuit (ie. House District 113)]

**OR**

☐ Report of Organization or Person Other than Candidate's Campaign Committee

Filing office use  
Only

Use Earlier of Post  
Mark or Hand  
Delivered Date

### 3. Identifying and Contact Information

(1) Ronald Howard Strength  
Full Name of Candidate or Non-Candidate Campaign Committee (PAC, Corporation, etc)

(2) 9/30/04  
Today's Date

(3) 2912 Hillcreek Drive Augusta Richmond County GA 30909  
Mailing Address City County State Zip Code

(4) (706) 827-4630 and / or (706) 821-1020  
Contact Phone Number (We will understand the release of this information as permission to call your office if necessary.)

(5) If a Candidate or Public Officer, is there campaign committee (one or more persons) to make campaign transactions, keep the financial records of the campaign, or file the reports? ☒ **Y** or **N** (6) If so, is the Committee registered with the Secretary of State? ☒ **Y** or **N**

(7) If so, complete the following:

John P. Gillion, Jr. Treasurer  
Name of Chairperson and / or Treasurer of said committee

### 4. Period for which you are Reporting You Must Check Only One box

My Non Election Year	My Election Year	Run-Offs (Report Required Only If you are in a Run Off Election)	Special Elections (Report Required Only If you are in a Special Election)
<input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)  <ul style="list-style-type: none"> <li>• Persons elected to office in each year following the year in which the election occurs</li> <li>• Persons leaving office with excess funds until such funds are expended as provided in the Act</li> <li>• Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only).</li> </ul>	<input type="checkbox"/> March 31, ____ (year) <input type="checkbox"/> June 30, ____ (year) <input checked="" type="checkbox"/> September 30, <u>2004</u> (year) <input type="checkbox"/> October 25, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off, ____ (year) <input type="checkbox"/> 6 days before General Run-Off, ____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off, ____ (year) <input type="checkbox"/> 6 days before Special Run-Off, ____ (year)	<input type="checkbox"/> 15 days before Special Primary, ____ (year) <input type="checkbox"/> 15 days before Special, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)

### Verification by Oath or Affirmation

State of Georgia

County of Richmond

I, John P. Gillion, Jr., being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on

September 30, 20 04

Leida L. Udette

Notary Public

My Commission expires

November 1, 20 04

[Signature]  
a. Signature of Candidate or b. Organization/Chairperson/Treasurer

PENALTIES: Any person who knowingly fails to comply with or who knowingly violates any of the provisions of the Ethics in Government Act shall be guilty of a misdemeanor.

Do Not Forget to Notarize!!!

# CAMPAIGN CONTRIBUTION DISCLOSURE SUMMARY REPORT

**Full name of (check only one box and complete):**

☒ **Public Officer or Candidate:** Ronald Howard Strength

☐ **Other Person or Organization required to file report:** \_\_\_\_\_

## Contributions Received

<b>1 I have:</b> <input type="checkbox"/> <b>No contributions to report.</b> <input checked="" type="checkbox"/> <b>The following contributions, including Common Source, to report:</b>		
	<b>In-Kind Estimated Value</b>	<b>Cash Amount</b>
<b>2</b> A. If this is the <b>first time to file a disclosure report for the current office sought</b> , ENTER 0 in both columns (one time only); or  B. If this is the first report of this Reporting Cycle*, ENTER 0 in the <b>in-kind</b> column and list any <b>net balance on hand</b> brought forward from the previous reporting cycle in the <b>cash amount</b> column (line 13 of previous report, or total funds left over at year end of previous cycle.); or  C. If this filing is the <b>second or subsequent filing of this Reporting Cycle</b> , list totals from <b>line 6</b> of previous report in both the <b>in-kind</b> and <b>cash amount</b> columns.	If this is the first report of the Reporting Cycle* Enter 0.  \$ 11,392. <sup>00</sup>	\$ 301,892. <sup>00</sup>
<b>3</b> Total amount of all contributions of <b>\$101.00 or more</b> received in this reporting period. Each such contribution must be listed on the "Listed Contributions Received" page!	- 0 -	\$ 1,350. <sup>00</sup>
<b>4</b> Total amount of all separate contributions of <b>less than \$101.00</b> each that were received in this reporting period. "Common Source" contributions must be aggregated on the "Listed Contributions Received" page!	- 0 -	\$ 625. <sup>00</sup>
<b>5</b> Total contributions reported this period (line 3 + 4).	- 0 -	\$ 1,975. <sup>00</sup>
<b>6</b> Total contributions to date (line 2 + 5). <b>Total to be carried forward to next report of this reporting cycle*.</b>	\$ 11,392. <sup>00</sup>	\$ 303,867. <sup>00</sup>

## Expenditures Made

<b>7 I have:</b> <input type="checkbox"/> <b>No expenditures to report.</b> <input checked="" type="checkbox"/> <b>The following expenditures to report:</b>	
<b>8</b> Total expenditures made and reported prior to this reporting period (line 12 of previous report). IF THIS IS THE FIRST REPORT OF THIS REPORTING CYCLE*, ENTER 0	\$ 229,640. <sup>35</sup>
<b>9</b> Total amount of all expenditures of <b>\$101.00 or more</b> made in this reporting period. Each such expenditure must be listed on the "Listed Expenditures Made" page!	- 0 -
<b>10</b> Total amount of all separate expenditures of <b>less than \$101.00</b> each that were made in this reporting period.	\$ 5. <sup>00</sup>
<b>11</b> Total expenditures reported this period (line 9 + 10).	\$ 5. <sup>00</sup>
<b>12</b> Total expenditures to date (line 8 + 11). <b>Total to be carried forward to next report of this reporting cycle*.</b>	\$ 229,645. <sup>35</sup>
<b>13 Net Balance On Hand (subtract line 12 from "Cash Amount" in line 6).</b>	\$ 74,221. <sup>65</sup>

\* O.C.G.A. § 21-5-34(b)(1)(D)(ii)

A reporting cycle shall commence on January 1 of the year in which an election is to be held for the public office to which a candidate seeks election and shall conclude:

(I) At the expiration of the term of office if such candidate is elected and does not seek reelection or election to some other office;

(II) On December 31 of the year in which such election was held if such candidate is unsuccessful; or

(III) If such candidate is successful and seeks reelection or seeks election to some other office the current reporting cycle shall end when the reporting cycle for reelection or

**Committee to Re-Elect R. Strength**  
**Contributions Ledger**  
For the Period From Jul 1, 2004 to Sep 30, 2004

Contributor	Date	Contribution	Address	City ST ZIP	Occupation
Vinod Bhalla	8/2/04	\$ 200.00	3541 Westlake Drive	Augusta, GA 30907	Executive
Days Inn	8/2/04	\$ 150.00	3026 Washington Road	Augusta, GA 30907	Hotel
Adarsh K. Gulati	8/2/04	\$ 200.00	3690 Foxfire Place	Martinez, GA 30907	Executive
Ravinder Jerath	8/2/04	\$ 150.00	2100 Central Ave	Augusta, GA 30904	Physician
Jugal Purohit	8/2/04	\$ 200.00	3702 Inveness Way	Martinez, GA 30907	Hotel Owner
T R Reddy	8/2/04	\$ 250.00	3539 West Lake Drive	Augusta, GA 30907	Executive
Dr. Kailash B. Sharma	8/2/04	\$ 200.00	727 Ravenel Rd.	Augusta, GA 30909	Doctor
		\$ 1,350.00			

# State of Georgia - Campaign Contribution Disclosure Report

## Listed Contributions Received of \$101.00 or More

(1) Name Ronald Howard Strength

☒ Original  
☐ Amendment

* Number	(2) Full Name of Contributor & Mailing Address (PAC affiliation if applies)	(3) Contributor			(4) Contribution Accepted for which Election	(5) Cash Amount	(6) In-Kind Contributions	
		Date Contribution Received	Occupation	Employer			Estimated Value	Description
	* See Attached Contributions Ledger	1/1				\$1,350. <sup>00</sup>	\$	
		1/1				\$	\$	
		1/1				\$	\$	
		1/1				\$	\$	
		1/1				\$	\$	
		1/1				\$	\$	
		1/1				\$	\$	
		1/1				\$	\$	

Page Total\*\*: \$1,350.<sup>00</sup> \$

The Act requires all public officers, candidates, and campaign committees to list contributions received and expenditures made which are individually \$101 or more and to disclose the total amount of all contributions received and expenditures made which are individually less than \$101.

\*For your convenience this column is provided so that you may number your entries. This may be of value in electronic filing, or should you need to amend in the future.

\*\*For the convenience of those persons preparing this document manually, we have included a place to add page totals. The use of page totals will make the completion of the summary page easier.

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**Listed Expenditures Made of \$101.00 or More**

**Medical Specialties**  
(1) Name Ronald Howard Strength  
☒ Original

## Amendment

[illegible]

Page Total\*\*: \$ \_\_\_\_\_

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